

Division of Licensing and Protection

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 0056	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED C 12/30/2015
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

KING'S DAUGHTERS HOME, INC.

10 RUGG STREET
ST ALBANS, VT 05478

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
R100	Initial Comments: An unannounced onsite complaint investigation was completed by the Division of Licensing and Protection on 12/30/15. Based on information gathered, the following regulatory violation was cited.	R100	All medications will be administered by the person who prepares the doses.	
R166 SS-E	V. RESIDENT CARE AND HOME SERVICES 5.10 Medication Management 5.10.d If a resident requires medication administration, unlicensed staff may administer medications under the following conditions: (4) All medications must be administered by the person who prepared the doses unless the nurse responsible for delegation approves of an alternative method of preparation and administration of the medications. This REQUIREMENT is not met as evidenced by: Based on staff interview and record review, the facility failed to assure that all medications were administered by the person who prepared the doses. Findings include: 1. Per review of the facility's staff communication log, an unlicensed staff member was requested on 10/4/15 in writing to prepare medications for administration later (8:00 AM) by another staff member. During an interview on 12/30/15 at 11:50 AM, the Manager confirmed having administered the medications which were prepared by another staff member.	R166	If person who is responsible for pouring meds is late arriving that person may use the 1 hour rule before or after the med time is assigned to administer meds (within the 1 hr time frame). If person responsible for med administration can not be available to prepare + administer medications, another staff person, RN or manager will prepare + administer meds effective today 1/12/16.	

Division of Licensing and Protection

Laboratory Director's or Provider/Supplier Representative's Signature

TITLE

(X6) DATE

DATE FORM

6899

74BK11

If continuation sheet 1 of 1

Mary J Pappas

1/13/16

Manager

1/13/16

mailed and 1/13/16 R166 POC accepted 1/20/16 JHosmer RN/pme